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CONFIRMATION NO. 6504

|                                                                                                                                                                                                                                                                                                                                                                                                             |                                                                                                                   |                                                          |                                  |                                                              |                           |                                |
|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------|----------------------------------|--------------------------------------------------------------|---------------------------|--------------------------------|
| <b>SERIAL NUMBER</b><br>10/809,300                                                                                                                                                                                                                                                                                                                                                                          | <b>FILING or 371(c) DATE</b><br>03/24/2004<br><b>RULE</b>                                                         | <b>CLASS</b><br>398                                      | <b>GROUP ART UNIT</b><br>2629    | <b>ATTORNEY DOCKET NO.</b><br>CFA00065US                     |                           |                                |
| <b>APPLICANTS</b><br>Fumiaki Usui, Tochigi, JAPAN;<br>Ryuji Ohmuro, Tochigi, JAPAN;<br><b>** CONTINUING DATA **</b> <i>no</i> <i>Mr</i><br><b>** FOREIGN APPLICATIONS **</b> <i>yes</i> <i>Mr</i><br>JAPAN 2003/088041 03/27/2003<br>JAPAN 2003/088042 03/27/2003<br>JAPAN 2004/026754 02/03/2004<br>JAPAN 2004/026755 02/03/2004<br><b>** IF REQUIRED, FOREIGN FILING LICENSE GRANTED **</b><br>06/08/2004 |                                                                                                                   |                                                          |                                  |                                                              |                           |                                |
| Foreign Priority claimed <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No<br>35 USC 119(a-d) conditions met <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No<br>Verified and Acknowledged <i>[Signature]</i>                                                                                                                                                          |                                                                                                                   | <input type="checkbox"/> Met after Allowance<br>Initials | <b>STATE OR COUNTRY</b><br>JAPAN | <b>SHEETS DRAWINGS</b><br>8                                  | <b>TOTAL CLAIMS</b><br>18 | <b>INDEPENDENT CLAIMS</b><br>4 |
| <b>ADDRESS</b><br>CANON U.S.A. INC. INTELLECTUAL PROPERTY DIVISION<br>15975 ALTON PARKWAY<br>IRVINE, CA 92618-3731<br>UNITED STATES                                                                                                                                                                                                                                                                         |                                                                                                                   |                                                          |                                  |                                                              |                           |                                |
| <b>TITLE</b><br>Optical transmission device                                                                                                                                                                                                                                                                                                                                                                 |                                                                                                                   |                                                          |                                  |                                                              |                           |                                |
| <b>FILING FEE RECEIVED</b><br>986                                                                                                                                                                                                                                                                                                                                                                           | FEES: Authority has been given in Paper<br>No. _____ to charge/credit DEPOSIT ACCOUNT<br>No. _____ for following: |                                                          |                                  | <input type="checkbox"/> All Fees                            |                           |                                |
|                                                                                                                                                                                                                                                                                                                                                                                                             |                                                                                                                   |                                                          |                                  | <input type="checkbox"/> 1.16 Fees (Filing)                  |                           |                                |
|                                                                                                                                                                                                                                                                                                                                                                                                             |                                                                                                                   |                                                          |                                  | <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) |                           |                                |
|                                                                                                                                                                                                                                                                                                                                                                                                             |                                                                                                                   |                                                          |                                  | <input type="checkbox"/> 1.18 Fees (Issue)                   |                           |                                |
|                                                                                                                                                                                                                                                                                                                                                                                                             |                                                                                                                   |                                                          |                                  | <input type="checkbox"/> Other _____                         |                           |                                |
|                                                                                                                                                                                                                                                                                                                                                                                                             |                                                                                                                   |                                                          | <input type="checkbox"/> Credit  |                                                              |                           |                                |